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Recordal Date: 04/14/2004 (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Reel/Frame: 015204/0358 Transform Pharmaceuticals, Inc. Recordal Date: 08/02/2004 Lexington, MA Reel/Frame: 015630/0810 Please check the appropriate assignee category or categories (will not be printed on the patent): D Individual Corporation or other private group entity O Government 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: Issue Fee
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